,	Application or Docket Number											
ALL ENTITY OTHER THAN OR SMALL ENTITY												
ATE	FEE		RATE	FEE								
SIC FE	E 385.00	OR	BASIC FEE	770.00								
\$ 9=		OR	X\$18=									
43=		OR	X86=									
145=		OR	+290=									
DTAL		OR	TOTAL									
OTHER THAN MALL ENTITY OR SMALL ENTITY												
ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE								
\$ 9=		OR	X\$18=									
43=		OR	X86=									
45=		OR	+290=	:								
TOTAL T. FEE	TAL OR TOTAL											
ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE								
S 9=		OR	X\$18=									
13=		OR	X86=									
45=		OR	+290=									
OTAL I. FEE		OR	TOTAL ADDIT. FEE									
TE	ADDI- TIONAL		RATE	ADDI- TIONAL								

Effective October 1, 2003												
CLAIMS AS FILED - PART I (Column 1)					ımn 2)	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			25				RATE	FE	Ε		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	EE 385	.00	R	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			∂ ∫ minus 20=		* 5		X\$ 9	=		R	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* 0		X43=				X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT		7				\dashv^{c}	R		
* If the difference in column 1 is less than zero, enter				"Ω" in α	rolumn 2	+145:			R	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA	^L		R	TOTAL	<u></u>	
CLAIMS AS AMENDED - PART II						OTHER THAN SMALL ENTITY OR SMALL ENTITY						
AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGHI NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA	RATE	ADD	OI-		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	:	0	R	X\$18=	
	Independent	*	Minus	***		=	X43=			R	X86=	
	FIRST PRESE	ENTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		+145=				+290=	
				,	•		TOTA			ျ	TOTAL	
		(0-1 1)		(0-1	0\	(0-1 0)	ADDIT. FE	Ε	0	н ,	ADDIT. FEE	
MENDMENT B		(Column 1) CLAIMS	· ·	(Colum		(Column 3)		ADD		I		ADDI-
		REMAINING AFTER AMENDMENT	,	NUME PREVIO PAID F	USLY	PRESENT EXTRA	RATE	TION	AL		RATE	TIONAL
	Total	*	Minus	**		=	X\$ 9=		Ö	R	X\$18=	
~	Independent	*	Minus	***	<u> </u>		X43=		0	R	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		+145=		O	۱	+290=	
							TOTA ADDIT. FE		OI	٦ ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	ın 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
ENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RATE	ADD TION/ FEE	AL .		RATE	ADDI- TIONAL FEE
MEN	Total	*	Minus	**		=	X\$ 9=	ŀ	OF	₹	X\$18=	
	Independent	*	Minus	***		=	X43=		OF	, [X86=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	ENDENT	CLAIM			-		ı		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												